U.S. Department of Labor Employment Standards Administration Office of Labor Management Standards Washington, DC 20210

# FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT Office of Management and Budget No. 1215-0188

Expires: 11-30-2002

MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

This report is mandator	y under P.L. 86-257, as amended	Failure to co	omply may	result i	n criminal p	rosecui	tion, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.	
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.								
For Official Use Only	1. FILE NUMBER	2. PERIOD	COVEREI	DAY	YEAI		(a) AMENDED — If this is an amended report correcting a previously filed report, check here:	
( No. 30200; )	000-218	From	09	01	200	0	(b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here:	
CIAS DROP		Through	08	3 1	200	) [	(c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here:	
			8. MAILI	NG ADD	RESS (Ty)	e or pr	int in capital letters.)	
IMPC	DRTANT		First Nar	ne			<del></del>	
<u> </u>	-						!	
JOHN YERRITAT Transport Willead		0-213 020	Last Nar	ne			: -	
NHC								
80 WEST HID 172 New York htt 1969		10\80	P.O. Box	• Buildin	g and Roo	m Numi	ber (if any)	
The second secon	. <del></del>				-			
			Number	and Stre	eet			
4. AFFILIATION OR ORGANIZATION N	AME		1					
E DESIGNATION (Land Lodge etc.)	6. DESIGNATIO	NI NIIMPED	City					
5. DESIGNATION (Local, Lodge, etc.)	6. DESIGNATIO	N NUNDER						
7. UNIT NAME (if any)			State	ZIP	Code + 4		-	
<ol> <li>Are your organization's records kept a (If "No," provide address in Item 75.)</li> </ol>	at its mailing address? Yes	No					<del></del>	
75. ADDITIONAL INFORMATION (If mo	re space is needed, attach addit	ional pages p	properly ide	entified.)				
Item Number		4 0 0 1		~-~				
Sch I LOANS REC	EIVABLE - 5	ADDL	PAC	2E5			SEE ATTACHMENT	
Sch 9 015B. TO (	OFFICERS - 3	ADDIL	PAC	2E >	_		FOR ADD'L DATA	
Sch 10 DISB TO 1	EMPLOYEES - 6	ADD'	L PA	GES	5			
Sch 13 OFFICE & AD	MIN EXP- 1	ADDIL	PA	6E				
Each of the undersigned, duly authorized	officers of the allove labor organiza	ation, declares	s, under the	applicat	ole penaitie:	of law.	that all of the information submitted in this report (including the information contained	
in any accompanying documents) has been	en examined by the signatory and	is, to the best	t of the und	lersigne	d's knowled	ge and	that all of the information submitted in this report (including the information contained belief) true, correct, and complete. (See Section VI on penalties in the instructions.)	
76. SIGNED:	my treet		SIDENT	77	. SIGNED	7	TREASURER (If other title,	
11/30/2001 (	212 ) 873 - 600		instruction	s.)		130	7 101 (2/2) 873- 7426 see instructions.)	
Date	Telephone Number					Date	e Telephone Number	

During the Reporting Pariod Did Very Organization	40. 11
During the Reporting Period Did Your Organization:	18. How many members did your organization have at the end of the
10. Have a "subsidiary organization" as defined in	reporting period?
Section X of the instructions?X	
	19. What is the date of your organization's next regular election of officers?   MO YEAR 09 2 0 0 5
11. Create or participate in the administration of a	20. What is the maximum amount recoverable
trust or other fund or organization, as defined	under your organization's fidelity bond
in the instructions, which provides benefits for members or their beneficiaries?	for a loss caused by any officer or employee of your organization?
monoto of their portollolation.	ompleyee or your organization.
12. Have a political action committee (PAC)	21. What are your organization's rates of dues and fees?
12. Have a political action committee (PAC) X	(Enter a minimum and maximum if more than one rate applies for any line.)
	Rates of Dues and Fees
13. Acquire or dispose of any goods or property in	]
any manner other than by purchase or sale?X	(a) Regular Dues/Fees \$ 2 hrs pay per month (Month, Year, etc.)
	(b) Initiation Fees \$
14. Have an audit or review of its books and records	
by an outside accountant or by a parent body auditor/representative?	(c) Transfer Fees \$
	(d) Work Permits \$per
15. Discover any loss or shortage of funds or	(Month, Year, etc.)
other property?X	OO During the appetitude of the second of th
(Answer "Yes" even if there has been repayment	22. During the reporting period, did your organization have any changes in its constitution and bylaws
or recovery.)	(other than makes of dues and face) or in prostings/
40. Have any officer who was noted that ago a	procedures listed in the instructions?
<ol> <li>Have any officer who was paid \$10,000 or more</li> <li>by your organization and also received \$10,000 or</li> </ol>	(If the constitution and bylaws have changed, attach two new dated copies. If practices/
more as an officer or employee of another labor	procedures have changed, see the instructions.)
organization or of an employee benefit plan?	23. Were any of your organization's assets pledged
•	as security or encumbered in any other way
17. Liquidate or reduce any liabilities without disbursement of cash?	at the end of the reporting period?
disbursement of cash?	24. Did your organization have any contingent
	liabilities at the end of the reporting period?
(If the answer to any of the above questions is "Yes," provide details	(If the answer to Item 23 or 24 is "Yes," provide details in
in Item 75 on page 1 as explained in the instructions for each item.)	Item 75 on page 1.)
	i

### STATEMENT A — ASSETS AND LIABILITIES

FILE NUMBER: 00 0 - 2 1 8

Complete Schedules	1 Through 15	Before Completing	Statement A
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Enter Amounts in Dollars Only — Do Not Enter Cents

Complete Concadies 1 111	rough 15 Before Completing Statement A		Linter Amounts in Donars	only Bo not Emer Ochio
	ASSETS Item	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
	25. Cash		4324728	5373341
	26. Accounts Receivable			
LTS.	27. Loans Receivable	1	5411438	4967876
ASSETS	28. U.S. Treasury Securities		9481477	8592690
	29. Investments	2	38507417	41040057
	30. Fixed Assets	5	745701	633979
	31. Other Assets	3	85641	87283
	32. TOTAL ASSETS		58556402	60 695226
	LIABILITIES Item	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
	33. Accounts Payable		0	4415
TES	34. Loans Payable	8	- · · · · · · · · · · · · · · · · · · ·	
LIABILITIES	35. Mortgages Payable		-	
LIAE	36. Other Liabilities	4	0	
	37. TOTAL LIABILITIES		0	4415
	38. NET ASSETS (Item 32 less Item 37)		58556402	60690811

#### Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only — Do Not Enter Cents

CASH RECEIPTS Item	From SCH #		CASH DISBURSEMENTS	From SCH #	AMOUNT
39. Dues		15314209	56. To Officers	9	1570095
40. Per Capita Tax			57. To Employees	10	1964003
41. Fees		·	58. Per Capita Tax		776426
42. Fines			59. Fees, Fines, Assessments, etc		
43. Assessments			60. Office & Administrative Expense	13	1832703
44. Work Permits		-	61. Educational & Publicity Expense		1105417
45. Sale of Supplies		9773	62. Professional Fees		1901627
46. Interest		2549673	63. Benefits	11	3095249
47. Dividends		277179	64. Contributions, Gifts & Grants	12	558613
48. Rents			65. Supplies for Resale		
49. Sale of Investments & Fixed Assets	6	27666410	66. Direct Taxes		336405
50. Loans Obtained	8		67. Withholding Taxes		1440085
51. Repayments of Loans Made	1	608562	68. Purchase of Investments & Fixed Assets	7	28285805
52. On Behalf of Affiliates for Transmittal to Them		26003252	69. Loans Made	1	165000
53. From Members for Disbursement on Their Behalf			70. Repayment of Loans Obtained	8	
54. Other Receipts	14	1746293	71. To Affiliates of Funds Collected on Their Behalf		26064347
			72. On Behalf of Individual Members		
			73. Other Disbursements	15	4030963
55. TOTAL RECEIPTS		74175351	74. TOTAL DISBURSEMENTS		73126738

If more space is needed to complete Schedules 1 through 8 or 11 through 15, continué on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule. For Schedules 9 and 10, use the continuation pages provided.

FILE NUMBER: 000-218

Enter Amounts in Dollars Only - Do Not Enter Cents

### SCHEDULE 1 — LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regardless of amount.  (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Recei Cash (D)(1)	ved During Period Other Than Cash (D)(2)	Loans Outstanding at End of Period (E)
1. Name: 80 W.E.T.H, CORP					
Purpose: WORKING CARMAL		:			
Security: NO NE 42.810 / MO.					
42.810/M0. Terms of Repayment: 0 ue 7/05	2,063,130		356,763		1,706,367
2. Name: 80 W.E.T.H CORP				<u> </u>	
Purpose: WORKING CAPITAL					
Security: NONE					
21, 839/m0. Terms of Repayment: 0 4 e 1/08	1,462,431		150,512		1,311,919
3. Name: Lo CAL 101		:			
Purpose: WARKING CAP MAL					
Security: NO NE					
Terms of Repayment/,250/mo.	0	50,000	10,000		40,000
4. Totals from additional pages (if any)	1,885,877	115,000	91,287		1,909,590
5. Totals of loans not listed above					
6. Totals of Lines 1 through 5	5411438	165000	608562		4967876
Enter the Totals from Line 6 in	Item 27 Column (A)	ltem 69	Ûltem 51	ltem 75 with Explanation	ltem 27 Column (B)

### SCHEDULE 2 — INVESTMENTS

(OTHER THAN U.S. TREASURY SECURITIES)

### SCHEDULE 3 — OTHER ASSETS

Description (A)	Amount (B)
Marketable Securities  1. Total Cost	41,040,057
2. Total Book Value	
List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.	
(a)	<u> </u>
(b)	
(c)	\$ 1 m
(d)	
Other Investments 4. Total Cost	:
5. Total Book Value	
List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.	· · · · · · · · · · · · · · · · · · ·
(a)	<u> </u>
(b)	
(c)	
(d)	
(e) Total from additional pages (if any)	ì
7. Total of Lines 2 and 5	41040057
Enter the Total from Line 7 in	

Description (A)			Book Value (B)
1. One from Affiliated L	açals		63,573
2. Deposit-Workers Con	op Fund	5	15,000
3. Lease security de	eposits		8,710
4.			
5.		i	
6. Total from additional pages (if any)	·		
7. Total of Lines 1 through 6			87283
Enter the Total from Line 7 in			介 m 31, Column (B)

#### **SCHEDULE 4 — OTHER LIABILITIES**

Description (A)	Amount at End of Period headers (B)
1.	and the second of
2.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3.	2.25 %
4.	to the same of
5.	
6. Total from additional pages (if any)	No la fore de la Felica de
7. Total of Lines 1 through 6	
Enter the Total from Line 7 in	் பிரி அளி ltem 36, Column (D)

### SCHEDULE 5 — FIXED ASSETS

FILE NUMBER: 000-218

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)				
1. Land (give location):								
2. Totals from additional pages (if any)								
3. Buildings (give location):								
4. Totals from additional pages (if any)				<u> </u>				
5. Automobiles and Other Vehicles	655,747	370,085	285,662	285,662				
6. Office Furniture and Equipment	597,555	381,802	215,753	215,753				
7. Other Fixed Assets	134,657	2,093	132,564	132,564				
8. Totals of Lines 1 through 7	1,387,959	753,980	633979	633,979				
Enter the Total from Line 8, Column (D) in	€ Column (D) in							

SCHEDULE 6 — SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. U.S. TREASURY SECURITIES	6,102,701	6,102,701	6,391,057	6,391,057
2. INVESTMENTS	20,408,197	20,408,197	21,275,353	21, 275,353
3.				
4.	<u> </u>			
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	26,510,898	26,510,898	27,666,410	27,666,410
		7. Less Reinvestn	nents	
		8. Net Sales	27	666410
Enter the Total from Line 8 in				∱ Item 49

## SCHEDULE 7 — PURCHASE OF INVESTMENTS AND FIXED ASSET

FILE NUMBER: 000-218

			,,,
Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. U.S. TREASURY SECURITIES	5,251,077	5/251,077	5,251,077
2. INVESTMENTS	22,926,394	22,926,394	22,926,394
3. AUTOMOBILES	58,852	58,852	58,852
4. OFFICE FURNITURE & EQUIPMENT	49,482	49,482	49,482
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	28,285,805	28,285,405	28,285,425
	7. Less Reinvest	ments	
	8. Net Purchases	28%	285805
Enter the Total from Line 8 in			<b>☆</b> Item 68

### **SCHEDULE 8 — LOANS PAYABLE**

Source of Loans Payable at Any	Loans Owed at	Loans Obtained	Repayment M	lade During Period	Loans Owed at	
Time During the Reporting Period (A)	Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)	
1.						
2.			<u> </u>			
3.						
4.						
5. Totals from additional pages (if any)	_					
6. Totals of Lines 1 through 5						
Enter the Totals from Line 6 in	் Item 34 Column (C)	·····································	<u> </u>	<u> </u>	€ Column (D)	

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## SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 0 0 - 2 1 8

Page 9 of 12

(A) Name (List all persons who held office during they received no salary or other disburs	the reporting period even if sements. Use all capital letters.)	Gross Salary (before taxes and		Disbursements for Official	Other	
andy robotrod the second diseases	Status	other deductions)	Allowances	Business	Disbursements	Total
(B) Title (Enter title of officer, such as PRESIDE	1 74	(D)	(E)	(F)	(G)	(H)
Last Name	First Name					
1. HALL	`S	185921	· · · · · · · · · · · · · · · · · · ·	7434	9480	202835
TICLE PRESIDENT	Status C					
Last Name	First Name					
2 M c C A N N	_ F	180797		3187	6169	190153
Title EXEC VP	Status C					
3. KERRIGAN	First Name	180797		930	12164	193891
THE SECR TREAS	Status C					· ·
Last Name	First Name		<u> </u>		( () ()	
4. BAKALO		124255		5 259	6,9 25	136439
Title VICE PRES	Status C					
Last Name	First Name					0 - 6
5. CALHOUN	<b></b>			278		278
TITLE EXEC COUNC	1 L Status C				<u> </u>	
6. CZUCZMAN	T	130550		16188	3745	210483
TINO VICE PRES	Status C					
Last Name	First Name					
7.JAMES				733		733
THE VICE PRES	Status C					
8. Totals from additional pages (if an	ny)	1,114,441		101,811	46,228	1,262,480
9. Totals of Lines 1 through 8		1,916,761		195,820	84,711	2,197,292
				10. Less Dedu	ctions	627197
Enter the Total from Line 11 in			Item 56 🗢	11. Net Disbur	sements /	570095
*Code for Status (C): past officer — P; conf		cer during the reporting		(If any officer was no your organization's cor	t elected at a regular e	lection in accordance with plain in Item 75 on page 1.)

\*Code for Status (C): past officer — P; continuing officer — C; new officer during the reporting period — N. your organization's constitution and bylaws, explain.

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### SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 000-218

				122 (10)MDZ(11 0	00-218
(A) Name (List all employees who received more than \$10,000 in total disbursement from your organization and any affiliates. Use all capital letters.)  (B) Position (Enter employee's job title.)	Gross Salary (before taxes and other deductions)	Allowances	Disbursements for Official Business	Other Disbursements	Total
(C) Name of Affiliated Organization (if applicable)	(D)	(E)	(F)	(G)	(H)
1. S C O T L A N D N	95388	····	11.65		0 1 0 0 0
Position ADMIN SECY	75 500		1660		97 048
Name of Affiliated Organization	-				
Last Name First Name					
2. Y A T E S	124 255	:	2955	5530	132740
Position ACCT MGR  Name of Affiliated Organization					
a. McCORMACK A					
	50496				50496
Position BOOKKEEPER					
Name of Affiliated Organization					
Last Name First Name					
4. OD ONNELL J	76275		1098		77373
4. OD ONNELL J Position ASST OFFICE MGR		•			
Name of Affiliated Organization					
Last Name First Name					
5. MURPHY M	49863	·			49863
Position SECRETARY					
Name of Affiliated					
Organization	2 2 4 2 2 4				
6. Totals from additional pages (if any)	2,176,885		149,427	34,672	2,360,984
<ol> <li>Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates</li> </ol>	8,387				8,387
8. Totals of Lines 1 through 7	2581,549		155,140	40,202	2,776,891
			9. Less Deduc		812888
Enter the Total from Line 10 in	***	Item 57 🖒	10. Net Disburse	ements : /	964003
form I M-2 (Revised 2000)		<del></del> ,			

### **SCHEDULE 11 — BENEFITS**

FILE NUMBER: 00 0-218

Description (A)	To Whom Paid (B)	Amount (C)
1. WELFARE	STAFF PLAN	1,933,893
2. WELFARE	LOCAL 513	110,827
3. PENSION	STAFF PLAN	995,179
4. PENSION	LOCAL 513	55,350
5. Total from additional pages (if any)		
6. Total of Lines 1 through 5		3095249
Enter the Total from Line 6		企 ltem 63

# SCHEDULE 12 — CONTRIBUTIONS, GIFTS & GRANTS

Description (A)	Amount (B)
1. M.J. QUILL SCHOLARSHIPS	72,829
2. CONTRIBUTIONS TO CHARITIES	207,814
3. CONT. TO EDUC INST	1, 100
4. CONT. TO LABOR ORG	188, 120
5. CONT. TO POLITICAL ORG	88,750
6.	
7. Total from additional pages (if any)	
8. Total of Lines 1 through 7	558613
Enter the Total from Line 8 in	্রি Item 64

# SCHEDULE 13 — OFFICE & ADMINISTRATIVE EXPENSE

Description (A)	Amount (B)
1. TELEPHONE	159,633
2. POSTAGE	173,651
3. EQUIPMENT RENTAL	104, 403
4. RENT	3 44, 0 66
5. UTILITIES	30,514
6. CLEANING SERVICE	39,478
7. Total from additional pages (if any)	981,958
8. Total of Lines 1 through 7	1.832703
Enter the Total from Line 8 in	ু ltem 60

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# SCHEDULE 14 — OTHER RECEIPTS

OTHER RECEIPTS	_
Description (A)	Amount (B)
1. SPECIAL CONT FROM LOCALS	9,203-
2. CREDIT CARD ROYALTY FAC	119,200
3. REIMB EXP FROM LOCALS	91,276
4. LONG TERM DIS. INS. FEE	96,000
5. EXPENSES REFUNDED	86,885
6. STAFF LIFE & HEALTH INS LOC	1,298,364
7. M.J. QVILL SCHOL, CONT.	45,365
8.	
9.	man comment of the same comment of the same comment
10.	* 1.00 min = 1.00 min
11.	A S
12.	
13.	3.3
14.	
15.	
16. Total from additional pages (if.any)	
17. Total of Lines 1 through 16	1746293
Enter the Total from Line 17 in	्री 

### SCHEDULE 15 — OTHER DISBURSEMENTS

Description (A) Amount (B)  1. INT ON INV. PURCHASED 35,23 2. ORGANIZING & SERY LOCALS 2,260,32 3. CONVENTION EXPENSES 353,33	24
2. ORGANIZING & SERY LOCALS 2,260,32 3. CONVENTION EXPENSES 353,3	24
3. CONVENTION EXPENSES 353,3	24
# Wile 1 Consulty 1977	-
1- A C 17 A T- A - C - A - C - C - C - C - C - C - C	28
4-DELEGATES & COMMITTEES 223,6.	
5. NEGOTIATIONS EXPENSE 642,7	88
6. EXPENSES FOR ADMIN LOC 353, 6	91
7. RESEARCH FEES -161,9	69
8	<i>j</i> 5 - <b>4</b> - 4
9.	<b>.</b> .
10.	
11.	
12.	
13.	
14.	
15.	
16. Total from additional pages (if any)	
17. Total of Lines 1 through 16 403096.	3
Enter the Total from Line 17 in	

GREANIZATION NAME: TRANSP	ORT	WORKERS	AFL-CIO	_
ENDING DATE OF PERIOD COVERED:	~ <del>2</del>	12.1/01		

FILE NUMBER: 000 - 218

PAGE 3 OF 3 ADDITIONAL PAGES

# SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during a they received no salary or other disburs)  (B) Title (Enter title of officer, such as PRESIDENT)	Status	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
SCOTT MACK	First Name  C  Status C			1158		1158
Title EXEC BOARD  Last Name  MCDONALD	First Name	92489	·	2109	6929	101527
Title EXEC BOAR?	Status C					
WHALEN TITLE EXEC BOARD	J Status C			215	ke:	213
Last Name	First Name		·			
Last Name	First Name					
Title  Last Name	Status First Name					
Title Last Name	Status First Name				_	
Title	Status			<u> </u>		
Last Name	First Name					
Title	Status Totals	92,489		3,482	6,929	102,900

ORGANIZATION	NAME:				F	ILE NUMBER:	<del></del> -	, 1
ENDING DATE O	PF PERIOD COVERED:	<del>_</del>					ADDITIONAL BACEO	٠.
SCHEE	OULE 9 — ALL OFFICERS A	ND DIS	 BURSEMEN	ITS TO OF			ADDITIONAL PAGES	·
	(List all persons who held office during the reporting period e they received no salary or other disbursements. Use all capit	ven if tal letters.)	Gross Salary (before taxes and		Disbursements for Official		<del>-</del>	
(B) Title	(Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)	other deductions) (D)	Allowances (E)	Business (F)	Disbursements (G)	Total (H)	
Last Name	First Name						(4.)	1
Title		Status						
Last Name	First Name							┨ 、
Title		Status				e e e e e e e e e e e e e e e e e e e		
Last Name	First Name	!					·	ł
, wasted					,	-		
Title	·	Status					<u>.</u>	
Last Name	First Name					-		]
Title	e.	Status	:					
Last Name	First N₅ <sup>6</sup>		· · · · · · · · · · · · · · · · · · ·					1
Title		Status						
Last Name	First Name			<u> </u>				
Title		Status						/
Last Name	First Name						-	
Titie		Status						
Last Name	First Name			<del></del>				•
Title		Status						
		Totals						

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\*U.S. Government Printing Office: 2001— 476-077

			_
ORGANIZATION NAME: TRANSPORT	WORKERS	AFL-CIO	_
ENDING DATE OF PERIOD COVERED:	ام لندا ه		

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PAGE 2 OF 3 ADDITIONAL PAGES

## SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

		<del></del>		T	7	
(A) Name (List all persons who held office during the they received no salary or other disbursen		Gross Salary (before taxes and	<b>A</b> 11	Disbursements for Official	Other	Total
(B) Title (Enter title of officer, such as PRESIDENT		other deductions) (D)	Allowances (E)	Business (F)	Disbursements (G)	(H)
KOZIATEK	First Name	46104				46104
Title VICE PRES	Status C					
TIME INC.	First Name  J	128558		5233	3151	136 947
TIDO EXEC BOARD	Status C	1				
LOMBARDO	First Name	124 255		1154	6516	131925
THE VICE PRES	Status C		<u> </u>			
	First Name			974		974
Title VICE PRES	Status C		<u> </u>			
MARTIN	First Name	124 255		6981	6365	13760
TITE VILE PRES	Status C					
MIHALICS	First Name			399		39
TITLE EXEC COUNCI	L Status C					
MIRRIONE	First Name			6333		633.
TILE VICE PRES	Status C	-				
OBRIEN	First Name	130492		4845	6368	141703
Title VICE PRES	Status C					
	Totals	553,664		25,919	22,400	601,983

ORGANIZATION NAME: TRANSP	ORT	WORKERS	AFL-CIO	
ENDING DATE OF PERIOD COVERED:		131/01		

FILE NUMBER: 0 0 0 -2 1 8

PAGE \_\_\_\_OF \_\_\_\_\_\_ ADDITIONAL PAGES

### SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who held office during the retired no salary or other disbursement)  (B) Title (Enter title of officer, such as PRESIDENT or	Status	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
	st Name	124255		323	3025	127603
Title VICE PRES	Status C					
ROBERTS	st Name	124255		2245	4433	130933
TITLE VICE PRES	Status C	·				
RODRIGUEZ 6				2607		2607
THE EXEC COUNCIL	_ Status C					
	st Name	95523		2498	3096	101117
THE EXEC COUNCIL	_ Status C			<b>!</b>		•
	st Name			60467		60467
TITLE EXEC COUNCIL	Status C					
Last Name Fin	st Name			314		314
TITLE EXEC COUNCIL	Status C					
Last Name Fin	st Name	124255		2765	6345	133365
TITLE EXEC COUNCIL	Status C					
	st Name			1191		1191
TITLE EXEC BOARD	Status C					
	Totais	468,288		72,410	16,899	557,597

Form LM-2 (Revised 2000)

ORGANIZATION NAME: TRANSPORT WORKERS AFL-C10

ENDING DATE OF PERIOD COVERED: 08/31/01

FILE NUMBER: 000-218

PAGE 1 OF 6 ADDITIONAL PAGES

		(OOMENIAU)			
(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and		Disbursements for Official	Other	
(B) Position (Enter employee's job title.)	other deductions)	Allowances	Business	Disbursements	Total
(C) Name of Affiliated Organization (if applicable)	(D)	(E)	(F)	(G)	(H)
Last Name First Name					
VARGAS L	38948				38948
Position CLERK Name of Affiliated					
Affiliated Organization					
Last Name First Name			-		
ROSEN D	180215		1528		181743
Position ATTORNEY  Name of Affiliated Organization					
Last Name First Name					· · · · · · · · · · · · · · · · · · ·
WECHSLER R	102037		1435		103 472
Position EDUCATION DIR					
Name of Affiliated Organization					
UCKELE B	84293				84293
Position ADMIN SECY  Name of Affiliated Organization					
Last Name First Name	<del>, , .</del>				
BURTON D	90227		2614		92841
Position ASST EDITOR					
Name of Affiliated Organization					
Totals	495,720		5,517		501,297

ORGANIZATION NAME: TRANS	ORT	WORKERS	AFL-CIO
ENDING DATE OF PERIOD COVERED:		31/01	

FILE NUMBER: 000-218

PAGE 2 OF 6 ADDITIONAL PAGES

POPOROENIEN		LEG (continued	<u>/</u>		<u> </u>
(A) Name (List all employees who received more than \$10,000 in total from your organization and any affiliates. Use all capital lett	disbursements Gross S ers.) (before tax		Disbursements for Official	Other	
(B) Position (Enter employee's job title.)	other ded		Business	Disbursements	Total
(C) Name of Affiliated Organization (if applicable)	(D)	(E)	(F)	(G)	(H)
Last Name First Name					
GANNON	125	218	7//		125929
Position EDITOR					
Name of Affliated Organization					
Last Name First Name					_
ASHLEY R	516	603			51603
Position CLERK					
Name of Affiliated Organization				_	
Last Name First Name					
WILLIAMS C	73 (	162			73462
Position COM COORD					
Name of Affiliated Organization					
Last Name First Name	8.11	2 2 3	·		94202
OHANLON 6	09	293			84293
Position ADMIN SECY					
Name of Affiliated Organization					
Last Name First Name KERLEE K	491	142			48442
•	10 7	1 2			10712
Position SECY				:	
Name of Affiliated Organization					
	Totals 383,	018	711		383,729

ORGANIZATION NAME: TRANSPORT WORKERS AFL-C10

ENDING DATE OF PERIOD COVERED: 08/31/01

FILE NUMBER: 000-218

PAGE 4 OF 6 ADDITIONAL PAGES

SOURDOLL IS - DISDOUSEMENTS TO I	-IIII LOILLO	(continued)	<u>'                                     </u>		
<ul> <li>(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</li> <li>(B) Position (Enter employee's job title.)</li> <li>(C) Name of Affiliated Organization (if applicable)</li> </ul>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
Last Name  MONEYPENNY  Position INTL REP  Name of Affiliated Organization	95523				95523
Last Name  GRANDFIELD  Position  DRGANIZER  Name of Affiliated Organization	95523		13840	4974	114337
Last Name  RESCH  Position INTL REP  Name of Affiliated Organization	95523		4559	3303	103385
Last Name  WIEDMAN  Position COPE DIR  Name of Affiliated Organization	95523		8470	7828	111821
Last Name  HALL  Position 5 ECY  Name of Affiliated Organization	44503				44503
Totals	426,595		26,869	16,105	469,569

ENDING DATE OF PERIOD COVERED: 08 12 11 01

FILE NUMBER: 000 - 218

PAGE 3 OF 6 ADDITIONAL PAGES

	IVII LOILLO	(00////////////////////////////////////			
(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and		Disbursements for Official	Other	
(B) Position (Enter employee's job title.)	other deductions)	Allowances	Business	Disbursements	Total
(C) Name of Affiliated Organization (if applicable)	(D)	(E)	(F)	(G)	(H)
Last Name First Name	· · ·				
PROCTOR E	82728		952		83680
Position ADMIN SECY  Name of Affiliated Organization					
Last Name First Name				<u>.</u>	
YINGST G	95523		3981	2311	101815
Position INTL REP  Name of Affiliated Organization					
Last Name First Name				_	:
SNEAD H	95523		7794	6046	109363
Position INTL REP				·	
Name of Affiliated Organization					
Last Name First Name		·	10200	11.001	
MASLANKA G	95523		10390	98/4	110787
Position INTL REP  Name of Affiliated	1				
Organization					
A L BA CH First Name	84293	;	1921		86214
Position ADMIN SECY					
Name of Affiliated Organization					
Totals	453,590	-	25,038	13,231	491,859

ORGANIZATION NAME: -		A
TRANSPORT	14.5-0.51 0.7	
* 1 K MAN/S N (/N/A	ババンドバレスラー	
		<u> </u>

ENDING DATE OF PERIOD COVERED: 0813

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FILE NUMBER: 000-218

PAGE 5 OF 6 ADDITIONAL PAGES

DOLLEDGEE 10 — DISDOL	13EMENTO TO E		(DOITHINGO)			
(A) Name (List all employees who received more the from your organization and any affiliates.	nan \$10,000 in total disbursements Use all capital letters.)	(DOIOI G IGNOU GITG		Disbursements for Official	Other	
(B) Position (Enter employee's job title.)		other deductions)	Allowances	Business	Disbursements	Total
(C) Name of Affiliated Organization (# a	pplicable)	(D)	(E)	(F)	(G)	(H)
Last Name	First Name					
WINSLOW	C	55982				55982
Position SECY						
Name of Affiliated Organization						
Last Name	First Name	~				
CAMPBELL	Ν	49149				49149
Position BOOKKEEPE  Name of Affiliated  Organization	- R					
Last Name	First Name					
DRUMMOND	6	95523		50	5336	100909
Position INTL REP					·	
Name of Affiliated Organization						
LAST NAME FREEDMAN	First Name	32011				32011
_	•	32011		· ·		32011
Position BOOKKEEPE	: <i>K</i>					
Name of Affiliated Organization						
Last Name	First Name	84293		245		84538
BORISUCK	M	04 673		Z 7 3		77338
Position $SECY$ Name of	·					
Affiliated Organization						
	Totals	316,958		295	5,336	322,589

ORGANIZATION NAME: TRANSPORT WORKERS AFR-CIO

ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 000-218

PAGE 6 OF 6 ADDITIONAL PAGES

<ul> <li>(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</li> <li>(B) Position (Enter employee's job title.)</li> <li>(C) Name of Affiliated Organization (if applicable)</li> </ul>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
Last Name  WILLIAMS  Position SECY  Name of Affiliated Organization	43202		2008		45210
Last Name  LEARY  Position BOOKKEEPER  Name of Affiliated Organization	14196				14196
Last Name  First Name  TRDTTI  Position ORGANIZER  Name of Affiliated Organization	43 6 0 6		88929		132535
Last Name  Position  Name of Affiliated Organization					
Last Name First Name  Position  Name of  Affiliated  Organization	·				
Totals	101,004		90,937		191,941

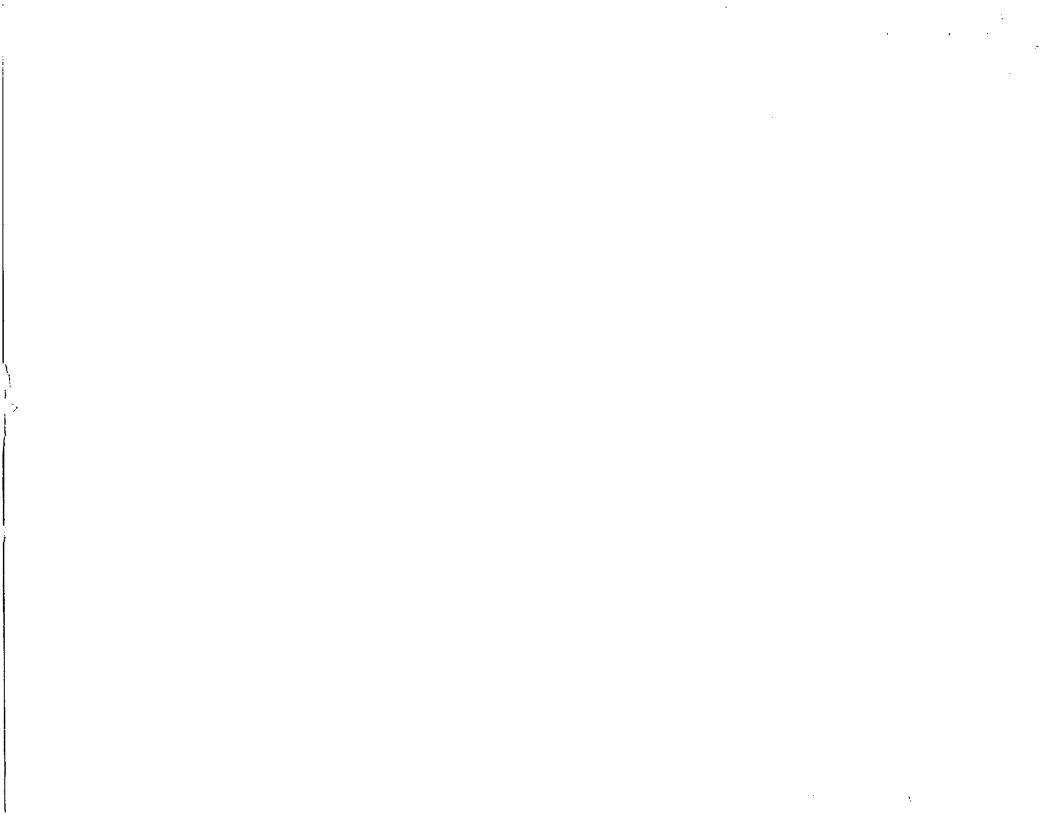
TRANSPORT WORKERS AFL-CIO
FORM LM-2
FILE # 000-218
PG 1, CINE 75 ATTACHMENT

Box 11, Pg 2 Transport Workers Staff Pension Plan

Box 12, Pg 2 Transport Workers Union Political Contributions Committee

Box 13, Pg Z Automobiles are traded in

Box 14, Pg 2 Andit performed by Shalik, Morris & Co, LLP, 7001 Brush Hollow Rd, Westbury, NY 11590



If more space is needed to complete Schedules 1 through 8 or 11 through 15, continue on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule. For Schedules 9 and 10, use the continuation pages provided.

Enter Amounts in Dollars Only - Do Not Enter Cents

SCHEDULE 1 — LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regardless of amount.  (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Rece  Cash (D)(1)	ived During Period Other Than Cash (D)(2)	Loans Outstanding at End of Period (E)
1. Name: LOCAL 260					
Purpose: WORKING CAPITAL					
Security: NO NE					
Terms of Repayment 2,500/mo.	13,500		13,500		0
2. Name: COCAZ 580					
Purpose: WORKING CAPITAL					
Security: NONE					
Terms of Repayment NO NE	79, 374		20,715		58,659
3. Name: LOCAL 562					
Purpose: WORKING CAPITAL		1			
Security: NONE					
Terms of RepaymentNONE	4,000		4,000		0
4. Totals from additional pages (if any)					
5. Totals of loans not listed above					
6. Totals of Lines 1 through 5	96,874		38,215		58659
Enter the Totals from Line 6 in	企 Item 27 Column (A)	Item 69	Item 51	Litem 75with Explanation	
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s 1 through 8 or 11 through 15, column headings used on the ded for additional pages in each ontinuation pages provided.

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Enter Amounts in Dollars Only - Do Not Enter Cents

EIVABLE

	EIVABLE				
	Loans Jutstanding at	Loans Made	Repayments Rece	eived During Period	Loans
	Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
ferms of Repayment: 100 NE	21,210				21,210
2. Name: LOCAL 563					
Purpose: WORKING CAPITAL					
Security: NO NE					
Terms of Repayment: NONE	20,000		·		20,000
3. Name: LOCAL 567					
Purpose: WORKING CAPITAL					
Security: NONE					
Terms of Repayment 580/ MO.	23,900		6,380		17,520
4. Totals from additional pages (if any)			3,200		111020
5. Totals of loans not listed above					
6. Totals of Lines 1 through 5	65,110		6380		58730
Enter the Totals from Line 6 in	企 	Item 69	1 tem 51	Litem 75with Explanation	∴ ltem 27 Column (B)

Form LM-2 (Revised 2000)

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Page 5 of 12

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s 1 through 8 or 11 through 15, continue on additional pages, using the sameled for additional pages in each schedule, and enter the totals on the line proventinuation pages provided.

FILE NUMBER: 000 - 2 / 8

Enter Amounts in Dollars Only - Do Not Enter Cents

SCHEDULE 1 — LOANS	BEC EIVABLE				
List holour Joons to officer		Loans Made	Repayments Rece	ived During Period	Loans
members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regardless of amount.	Olart of Period S (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
1. Name: LOCAL 52					
Purpose: PURCHASE BLDG					
Security MORTGAGE					
Terms of Repayment: 046 51/6	0	115,000	1,095		113,905
2. Name: LOCAL 5					
Purpose: PURCHASE BLDG					
Security: MORTGAGE					
2,135/m0. Terms of Repayment <u>Due 6/07</u>	140,149		17,740		122,409
3. Name: LOCAL 568					
Purpose: PURCHASE BLOG					
Security: MORTGAGE					
3,327 ) m.o. Terms of Repayment: Due 12/27	485,627		6,118		479 579
4. Totals from additional pages (if any)					479,509
5. Totals of loans not listed above					
6. Totals of Lines 1 through 5	625,776	115000	24,953		715823
Enter the Totals from Line 6 in	item 27 Column (A)		↑tem 51	ltem 75with Explanation	⊕ 1

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If more space is needed to complete Schedule 1 through 8 or 11 through 15, continue on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule. For Schedules 9 and 10, use the continuation pages provided.

FILE NUMBER: 000-218

Enter Amounts in Dollars Only — Do Not Enter Cents

SCHEDULE 1 — LOANS RECEIVABLE

SCHEDULE I - LUANS	KECEIVADLE				
List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to	Loans Citstanding at	Loans Made	Repayments Receiv	ed During Period	Loans Cuttonellan et
business enterprises regardless of amount. (A)	Sart of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
1. Name: LOCAL 526					
Purpose: PURCHASE BLDG					
705)mo Terms of Repayment Due 4/29		•			
Terms of Repayment 1948 9/27	104,547	والمراجع المراجع المرا	1,182		103,365
2. Name: LOCAL 502					
Purpose: PURCHASE BLOG	-			•	
Security: MORTGAGE	:				
2,714/mo. Terms of Repayment Due 7/12	263,865		14,553		249,312
3. Name: LOCAL 567	•				
Purpose: PURCHASE BLDG					
Security: MORTGAGE					
2,667/m 9 Terms of Repayment: Due 3/25	379,705		5,054		374,651
4. Totals from additional pages (if any)					
5. Totals of loans not listed above					
6. Totals of Lines 1 through 5	748117		20,789		727328
Enter the Totals from Line 6 in	☆ item 27 Column (A)	企 ltem 69	ltem 51	ltem 75with Explanation	tem 27 Column (B)

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If more space is needed to complete Schedules 1 through 8 or 11 through 15, continue on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule. For Schedules 9 and 10, use the continuation pages provided.

Enter Amounts in Dollars Only - Do Not Enter Cents

SCHEDULE 1 — LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting	Loans		Repayments Receiv	ved During Period	Loans
period exceeded \$250 and list all loans to business enterprises regardless of amount.  (A)	Outstanding at Start of Period (B)	Loans Made During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)
1. Name: LOCAL 565				:	
Purpose: PURLHASE BLDG					
Security: MORTGAGE  2,175/m0  Terms of Repayment: One 1/41	350,000		950		349,050
	203,000				
2. Name:					
Purpose:					
Security:					
Terms of Repayment.					
3. Name:					
Purpose:					
Security:					
Terms of Repayment:					
4. Totals from additional pages (if any)					
5. Totals of loans not listed above					
6. Totals of Lines 1 through 5	350,000		950		349,050
Enter the Totals from Line 6 in	1tem 27 Column (A)	行		tem 75with Explanation	企 Item 27 Column (B)

FILE NUMBER: 000-218
Amount (C)
€ 1 tem 63

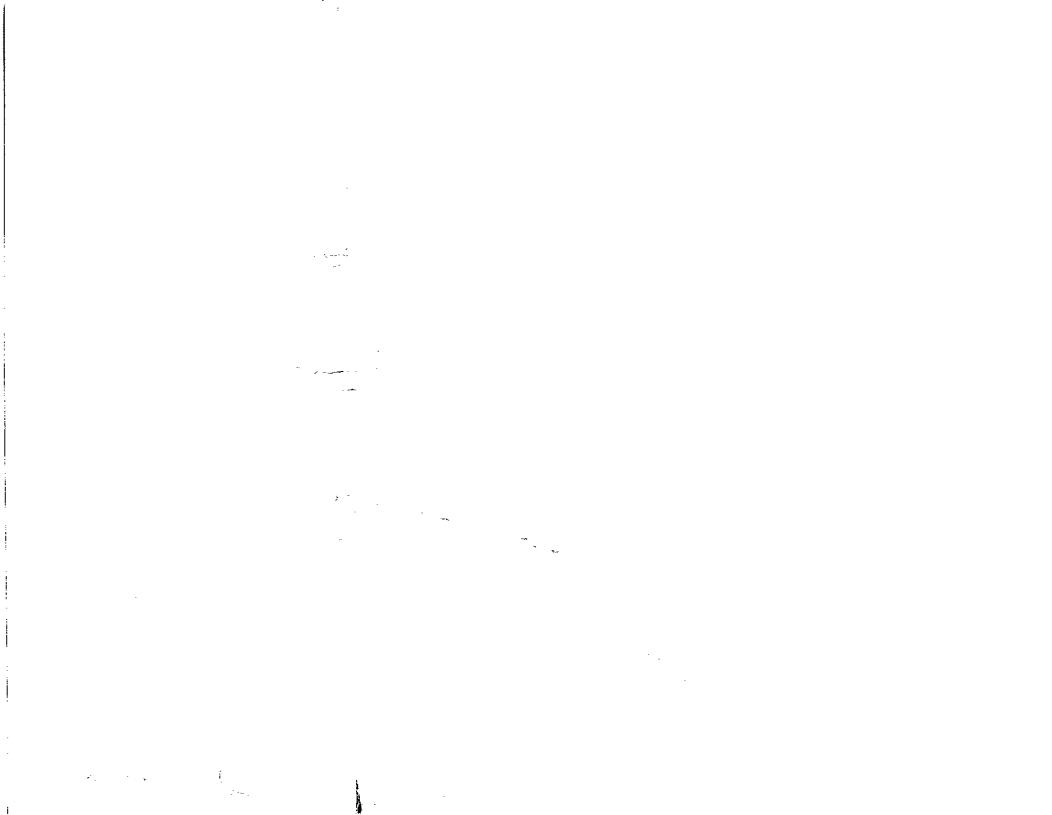
### **VISTRATIVE EXPENSE**

ñ	Amount (B)
UES, PRINTING	321,858
MPENSES	307, 307
. , , uNS	79,917
- INSURANCE	272, 876
5.	
6.	
7. Total from additional pages (if any)	
8. Total of Lines 1 through 7	981,958
Enter the Total from Line 8 in	企 Item 60

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	cription (A)			To
1.				
2.				<del></del>
3.				
4. ·				
5. Total from additional pages (if any)				
6. Total of Lines 1 through 5				
Enter the Total from Line 6	*************			NIEDIU
CHEDULE 12 —		NTS		•
CHEDULE 12 — CONTRIBUTIONS, GIFT Description		Amount		•
CONTRIBUTIONS, GIFT			OI	FICE 8
CHEDULE 12 — CONTRIBUTIONS, GIFT  Description (A)		Amount	1.5	FICE 8
CHEDULE 12 — CONTRIBUTIONS, GIFT  Description (A)  1.		Amount	1.9	TATIONEI COMPU
Description (A)  1.		Amount	1.9	TATIONEI COMPU
Description (A)  1.		Amount	1.5	TATIONES COMPU
Description (A)  1.	S & GRA	Amount	1.5	TATIONEI COMPU
Description (A)  1.  2.  3.	S & GRA	Amount	1.5	COMPUSUES

